

MONTANA BOARD OF VETERANS AFFAIRS

- MEETING MINUTES -

April 16, 2014

The Montana Board of Veterans Affairs was called to order by Chairwoman Sylvia Beals at 2 p.m., April 16, 2014 at the Womack Armory, Fort Harrison, Montana. Board members, special presenters and Montana Veterans Affairs Division staff in attendance were:

Sylvia Beals, Chairwoman	David Boyd, Member
Peter Olson, Member	Joe Foster, Administrator
Gary Sorensen, Member	Denny Lenoir, Rep. Daines
Bill Willing, Vice-Chair	Michael Hagenlock, Member
Mary Creech, Member	Lee Ann Hall, Budget Analyst
Shawn Backbone, Member	Kelly Ackerman, Senior VSO
Maj. Gen. Matthew Quinn, Member	Sarah Price, Member
Rick Norine, Dept. of Public Health and Human Services	
Dr. Trena Bonde, Member	Todd Dunlap, VA Montana
Donna Church, VA Montana (Regional Office)	

Chairwoman Beals opened and thanked everyone for being present, and roll call was taken. She then asked if there were any additions/deletions to last meeting's Minutes; and if none, that a motion be made to approve the Minutes, as written. With no changes were discussed or made, the motion to approve was so moved and seconded. The motion carried.

Joe Foster requested a change in the meeting's published order of business to accommodate federal VA staff members supporting the "VA Staff Forum." Presenters Dr. Bonde and Todd Dunlap of the VA-Montana Healthcare System had to leave by 3 p.m. to attend other functions. Permission was granted and the "VA Staff Forum" portion of the meeting began. Provided are the questions asked and the answers provided:

Question 1: Liberty House: An update of its usage, criteria for utilization and long-term viability.

Answer: Dr. Bonde and Todd Dunlop explained that the Liberty House was originally built for family members' usage when a veteran had overnight stay at the VA hospital. However, the facility's eight beds were consistently not fully utilized. Therefore, policy was changed to utilize four beds for family usage (as envisioned) and use the other four rooms for veterans (themselves) who are receiving treatment at the VA hospital and require overnight lodging. Previously, these veterans would be commercially lodged. As a result, VA Montana is now saving approximately \$11,000 a year and are able to use this budget availability for other Fort Harrison VA facility projects or services. Regarding long-term viability, Liberty House is fully funded and operating smoothly.

Question 2: Why does VA healthcare services meet only once per month to authorize prosthetic devices and other items (e.g., ramps) needed by service-connected disabled veterans?

Answer: Dr. Bonde explained they meet more than once a month; in fact, the committee meets as frequently as necessary since it utilizes “virtual meetings.” Typically, the committee meets weekly. Board member Price asked if there was a limit as to how many prosthetics a veteran is able to attain. Dr. Bonde said the program is designed to provide veterans all devices or items the veteran is authorized, based upon his/her specific situation and disability status.

Question 3: Please explain the interaction/process between VA medical services billing, Tricare and any other medical insurance program a veteran may also carry.

Answer: Todd Dunlop stated that the VA functions, in this respect, like any other insurance provider in its billing processes; however, with one significant distinction – that being that any billing made to the veteran’s insurance company (if there is one), is never charged to the veteran – even if the billed insurance company ultimately does not pay the VA. By billing the veteran’s primary insurer, VA-Montana has been able to attain approximately \$10 million annually, which is reinvested into the VA healthcare system. Veterans frequently are confused when they receive statements from their primary insurance company reflecting charges for VA provided services. However, the veteran is never asked to pay those charges.

Question 4: Please provide an update regarding the Memorandum of Understanding (MOU) signed between the Veterans Health Administration and the Indian Health Service (IHS), specific to Montana reservations. Please address how the process is working, if being utilized by any reservation’s IHS facility and VA-Montana.

Answer: The VA-Montana has an MOU with the IHS facilities in Montana, whereby the VA will reimburse the IHS for the veterans who receive healthcare on the reservations. Dr. Bonde said that eventually pharmacy services will be authorized in the reimbursement process. However, further discussion revealed that there are still questions as to how many of Montana’s reservation IHS facilities actively participate and the full nature of which Native veterans participate; specifically if the veteran’s medical services are in regards to any medical service or only those resultant of a military service-connected condition.

Question 5: Please describe the process by which a veteran is “enrolled” into the in-patient substance abuse/psychological treatment center and how the veteran’s stay is determined, and what services are provided after discharge.

Answer: Dr. Bonde explained that the in-patient treatment facility is actually comprised of three program types. The first program she discussed was the 45-day “PTSD residential program.” The program currently has a waiting list, and patients are identified via treatment with a VA psychiatrist. The second program is the “Acute Unit.” Enrollment in this program is typically due to a crisis

situation, frequently with a suicidal context. The patient's stay may be anywhere from two hours to "x" weeks, entirely dependent upon the situation that brought the patient to this program. Significantly, the patient cannot be mandated to stay, he/she can leave at any time. The third program is "Substance Abuse Treatment." This program has varying lengths of time, based upon the patient's condition and behavior modification treatment. Follow-up appointments and placement assistance in support groups are provided. The programs all ensure follow-up services specific to the issues which brought the patient into the facility.

The "forum" was extremely informative and Board members requested additional ones, periodically, in the future. With this topic area completed, the Board resumed its scheduled briefings, starting with the division operations report.

Joe Foster reported that the division has hired two new veteran service officers; Mike Stone, Veteran Service Officer I in Kalispell; and Candice Hering, Veteran Service Officer I in Great Falls. Both begin in early May.

Joe then explained the veteran services financial impact and claims production reports. Both reports capture statistics on a monthly basis, and show the type claim services produced; as well as the financial impact of our veterans service officers' work effort. The report showed that as of March 1, 2014, the division's financial impact was \$109,737,050. The production handout showed 1471 claim products submitted to the federal VA, as of that same date.

The "Veteran" on the Montana driver's license program is going well. As of March 1, division service officers processed 1058 applicants. A question was asked as to why veterans applying for/attaining "Veteran" vehicle license plates couldn't use that status as qualifying for "Veteran" on a driver's license rather than going through the current process mandating authentication of veteran status through an agency veterans service officer. Joe replied that there are a number of reasons, including: not all motorists who have a "veteran" license plate are veterans, county officials who authorize license plates generally have a difficult time fully understanding a DD Form 214, and there is a very high standard of care associated with ensuring that data on a Montana driver's license is absolutely correct – to include veteran status. Plus, there is a financial aspect to this standard in that businesses offer discounts based upon "veteran" status. There is only one way to ensure the authentication standard is accurate, which is by processing through one of the division's veterans service officer professionals.

The issue of whether or not Tricare complies with the Affordable Care Act was discussed, and a handout provided. (Tricare does comply.) Also provided was an article on how the VA is distributing a newly redesigned, more secure Veteran Health ID card. The last handout discussed was a copy of a *Missoulian* "letter to the editor" which conveyed the writer's appreciation to division staff for information regarding "pension poaching."

Joe then discussed the \$1.74 million expansion and improvement project at the Montana State Veterans Cemetery at Fort Harrison. Construction has restarted, with a completion date expected by the end of May 2014.

The National Cemetery Administration has developed a “draft” set of inspection standards by which state veterans cemeteries will have to comply. The Western Montana State Veterans Cemetery in Missoula was selected as a pilot assessment site – one of five nationally, and will be inspected June 10-12, 2014. Based upon that inspection, modifications to the inspection standard may result. At the very least, Montana’s veterans cemeteries will have first-hand knowledge of the new inspection standards and how to best achieve/surpass them.

Rick Norine, Chief of the Nursing Facilities Services Bureau, Dept. of Public Health and Human Services gave an update on the Southwest Montana Veterans Home envisioned to be built in Butte. He discussed the federal VA’s priority ranking of the project and what the ranking is based upon. For the home to be ultimately constructed, it will require further support by the Montana Legislature and Governor to attain the necessary state-match construction funds.

Joe explained that our division is investing into technology that will significantly upgrade our veterans service officers ability to serve their clientele in claim product production/submission to the federal VA. As envisioned, a service officer – on outreach in remote Montana – could, with this technology, electronically transmit a fully developed claim product directly to the VA’s Fort Harrison Regional Office, and the claim could be rated within two weeks. Senior Service Officer Kelly Ackerman further explained the technology; as well as detailing the federal VA’s policy and actions impacting veteran claim products, submissions and outcomes. Donna Church, outreach specialist with the Fort Harrison Regional Office, further explained the new claims processing and supporting systems; and stated how the Montana Veterans Affairs Division’s investment into the technology will make an immediate and substantially positive difference in how Montana veterans will experience their claim products being rated. Donna also explained the “fully developed claim” program.

Other Board activities included Shawn Backbone describing the Apsaalooke Warrior Apartments Groundbreaking Ceremony to be held May 8. He provided written invitations to all Board members. Also, Board member David Boyd presented Joe Foster with a Tribal blanket in recognition of the Board’s and division’s work on veterans issues and services.

With no additional questions or discussion from Board members, the next Board meeting’s date and location were discussed and determined. The next meeting will be held at the Montana Army National Guard Readiness Center near Belgrade on July 16, 2014 at 2 p.m. The meeting was adjourned at 3:30 p.m.

Sylvia Beals, Chairwoman

Lee Ann Hall, Recorder